

Express Mail Label EV335521481UST 27 2003

Attorney Docket No. 29195-8222US1  
Semitool Ref No. P02-0020US2

## PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

REAPPLICATION OF: RANDY A. HARRIS ET AL.

APPLICATION No.: 10/621,037

FILED: JULY 15, 2003

**FOR: APPARATUSES AND METHOD FOR  
TRANSFERRING AND/OR PRE-  
PROCESSING MICROELECTRONIC  
WORKPIECES**

EXAMINER: UNKNOWN

ART UNIT: 3652

CONE No: 8893

**Response to Notice to File Missing  
Parts of Application**

Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

1. In response to the Notice to File Missing Parts mailed October 16, 2003 (copy enclosed), applicant submits the following:

- A Petition for \_\_\_\_\_ -Month Extension of Time
- An Executed Declaration of Inventorship
- A Power of Attorney by Assignee
- A Preliminary Amendment
- An Information Disclosure Statement, Form PTO-1449, and references (if appropriate)
- A Sequence Listing printout, floppy diskette, Matching Declaration under 37 C.F.R. § 1.821, and copy \_\_\_\_\_ of Sequence Listing Notice
- A *copy of an assignment recordation cover sheet for informational purposes only (Form PTOL-1595) for assignment(s) being filed separately.*
- Authorization for Extensions

Formal Drawings  
 Copy of Notice to File Missing Parts

2. Authorization for Extensions of Time Under 37 C.F.R. § 1.136 (a)(3)

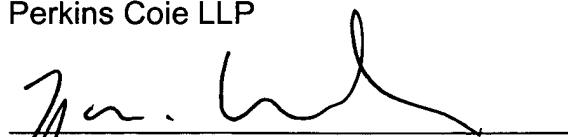
Applicant petitions for an Extension of Time if necessary for timely filing of this Response. The Commissioner is authorized to treat this or any future reply requiring a Petition for Extension of Time under 37 C.F.R. § 1.136 (a)(3) for its timely submission as incorporating a petition therefor for the appropriate length of time. Please charge all required extension of time fees in this application to Deposit Account No. 50-0665.

3. Fee Calculation and Payment

For:	(Col. 1) No. Filed	(Col. 2) No. Extra	Small Entity		or	Other Than a Small Entity	
			Rate	Fee		Rate	Fee
Basic Fee				\$385.00	or		\$770
Total Claims	59 - 20	39	x \$ 9 =	\$	or	x \$ 18 =	\$702
Independent Claims	9 - 3	6	x \$43 =	\$	or	x \$ 86 =	\$516
<input type="checkbox"/> Multiple Dependent Claim Presented			+ \$145 =	\$	or	+ \$290 =	\$
Missing Parts Surcharge				\$65.00			\$130
*If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$	or	TOTAL	\$2118

- Applicant claims small entity status. See 37 C.F.R. § 1.27
- Enclosed is a check for \$2118.
- Please charge \$ to Deposit Account No. 50-0665.
- Please charge any deficiency or credit to Deposit Account No. 50-0665. A duplicate copy of this Response is enclosed.

Respectfully submitted,  
Perkins Coie LLP



John M. Wechkin  
Registration No. 42,216

Date: October 27, 2003

**Correspondence Address:**

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